



Peer Support Around Family Matters

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The Presenters



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Acknowledgement



Shirley D. Maniece, C.P.S.



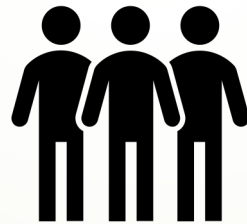
Outline



- Family and Mental Health Recovery – An Overview of the Research
- VA Family-Based Interventions, Programs, Resources
- Family Involvement in Treatment
- Shared Decision Making Protocol for Family Involvement in Treatment
- Family and the Role of the Peer Support Specialist
- Family Matters Manual

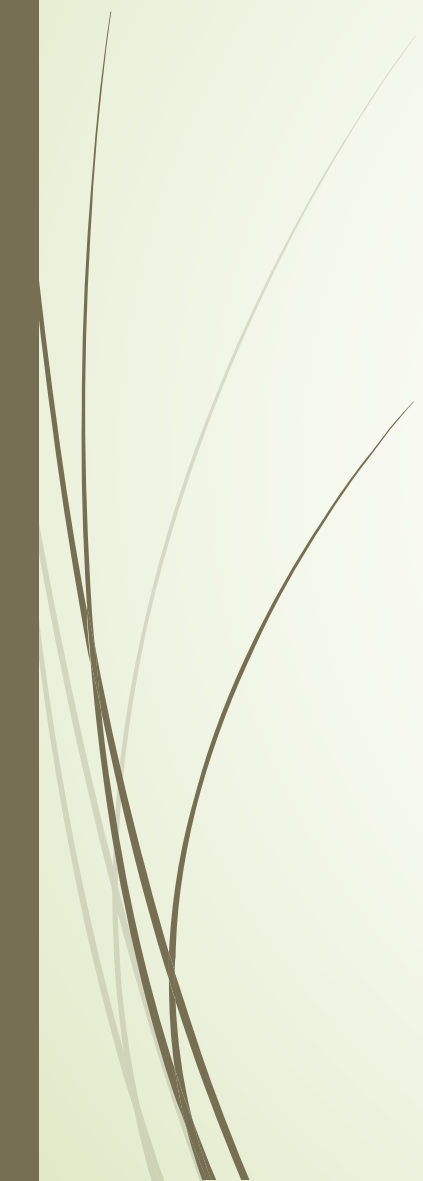
What is family?

- Research often emphasizes the role of immediate family – parents, spouses, children
- BUT - family can be *any* social support that a person chooses





An Overly Negative Focus

- Psychology research on family and mental illness has tended to focus on the negative
 - History of family **blaming** in our field
 - Family does not cause mental illness!
- 



Family and Mental Health Recovery

- Family can have negative impacts on mental health recovery by*:
 - Being overly critical and hostile
 - Being overly intrusive and controlling
 - Blaming the person for their problems

Hooley et al., 2007

*based mostly on research in Western cultures with White individuals – research with African Americans, Mexican Americans, South Asians living in the UK, and research in non-Western countries show more inconsistent findings

Hashemi, 1997; Bhugra et al., 2003; Rosenfarb et al., 2006; Lopez et al., 2004

Family members may be in distress

- Having a close relative with mental illness can have negative effects on
 - Mental health
 - Self-care
 - Physical health
 - Family functioning
 - Self-esteem



Perlick et al., 2006; Perlick et al., 2007



Family and Mental Health Recovery

- ▶ Family can have positive impacts on mental health recovery by:
 - ▶ Being warm and kind
 - ▶ Being calm, hopeful, and optimistic
 - ▶ Providing a source of social support

Hooley et al., 2007; Lopez et al., 2004; Corrigan & Phelan, 2004



Family as a Source of Social Support

- Larger and more satisfying social networks are associated with more positive mental health recovery

Corrigan & Phelan, 2004

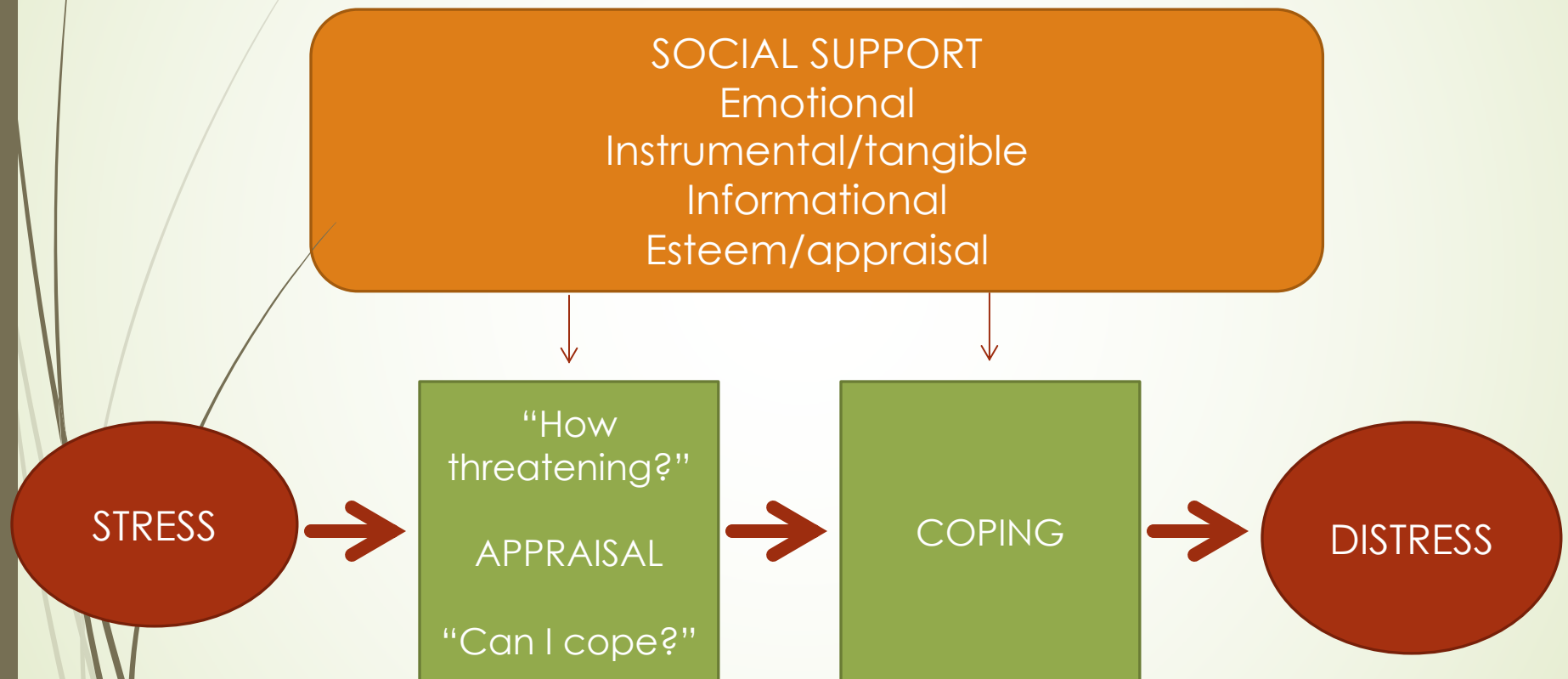
- Four types of social support:
 - Emotional
 - Instrumental/tangible
 - Informational
 - Esteem/appraisal

Types of Social Support

Example: A 39-year-old graduate student and mother of 2 young children is feeling overwhelmed after being diagnosed with bipolar I disorder.

| Types of Social Support | | |
|-------------------------|--|---|
| Construct | Definition | Application |
| Emotional | Expressions of empathy, love, trust and caring | Close friends and family members provide hope and a listening ear Her husband decides to work from home 1 day per week to watch the children while she attends therapy |
| Instrumental/tangible | Tangible aid and service | |
| Informational | Advice, suggestions, and information | Her mother offers advice about her own mental health treatment |
| Esteem/Appraisal | Information that is useful for self-evaluation | A close friend of 15 years reminds her of all of the qualities that equip her to cope with her illness (to encourage an accurate assessment of her current situation) |

How does social support impact outcomes?



Cohen and Wills, 1985



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VA Family-Based Interventions

- Family Consultation
- Evidence-Based Treatments
 - Behavioral Family Therapy for Serious Psychiatric Disorders
 - Integrative Behavioral Couples Therapy
 - Cognitive Behavioral Conjoint Therapy for PTSD
 - Behavioral Couples Therapy for Substance Use Disorder
- Family Education
 - Operation Enduring Families
 - Support and Family Education (SAFE)
 - VA-NAMI Family to Family Partnership

For more information see the VA Family Services SharePoint:

<https://vaww.portal.va.gov/sites/OMHS/familyservices/default.aspx>



Behavioral Family Therapy for Serious Psychiatric Disorders

- Designed for a person with schizophrenia, bipolar disorder, or severe depression and one or more family members
- One family meets with a licensed provider
- 20-25 sessions over nine months
- Present focused
- Provides education, skills training in communication and problem solving
- **Can reduce relapse rates by 50%!**

McFarlane et al., 2003

VA Family-Based Interventions

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NAMI Family-to-Family Education Program

- 12-week group for family members
- Developed by a family member of a person with mental illness (Joyce Burland)
- Taught by trained family members
- Based on trauma-recovery and stress-coping models
- People who take the course can become teachers of the course



NAMI Family-to-Family Education Program

- Randomized controlled trial compared Family-to-Family to a wait list control
- Family-to-Family associated with significant lasting improvements in:
 - distress
 - problem solving
 - coping
 - knowledge
 - empowerment

...for family members

Lucksted et al., 2013



Resources for Parenting

- Parenting for Service Members and Veterans
Free online course with videos and interactive content:
<http://www.veterantraining.va.gov/parenting>
- Parenting Skills Training in Affective and Interpersonal Regulation (STAIR)
Licensed clinicians can be trained in STAIR
Teaches Veterans emotional and interpersonal skills for parenting

For more information see the VA Family Services SharePoint:

<https://vaww.portal.va.gov/sites/OMHS/familyservices/default.aspx>



NATIONAL VA RESOURCES

Coaching Into Care

A national hotline that provides information about how to motivate your loved one to seek care at 1-888-823-7458

<http://www.mirecc.va.gov/coaching>

Caregiver Support Line

A national hotline that provides information about caregiver support services you may be eligible for at 1-855-260-3274

<http://www.caregiver.va.gov>

For more information see the VA Family Services SharePoint:

<https://vaww.portal.va.gov/sites/OMHS/familyservices/default.aspx>



Vet Centers

<https://www.vetcenter.va.gov/>

Offer marriage and family counseling



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Family Involvement in Treatment for Serious Psychiatric Disorders

- Best Practice:

Individuals who have ongoing contact with their families should be offered a family psychosocial intervention, such as Behavioral Family Therapy

- Even modest family involvement in treatment associated with better treatment engagement
- Family involvement correlated with three domains of recovery: **empowerment, hope, and knowledge of illness**

McFarlane et al., 2000; Resnick et al., 2004; Dixon et al., 2009

Preferences for Family Involvement

- In a sample of 801 Veterans with schizophrenia:
 - 89.4% had a living family member
 - 61.9% had a family members who provided them with regular support
 - 27.2% of these wanted their family member involved in their care
 - Of those who did not have a supportive family member, but had living family, 21.0% wanted their family involved
- Barriers: concerns about privacy and burden
- Preferred methods of involvement: contact with the patient's psychiatrist and education about the illness

Cohen et al., 2019

Preferences for Family Involvement

Table 2

Consumer preferences and expectations regarding family involvement in care

| Item | N | Agree | | Strongly agree | |
|---|-----|-------|-----------------|----------------|----|
| | | N | % | N | % |
| “I want my family to . . .” | | | | | |
| Receive written information about my mental illness | 228 | 85 | 37 ^a | 56 | 25 |
| Attend a general or educational support group | 221 | 80 | 36 ^a | 43 | 20 |
| Attend individual or group sessions | 222 | 85 | 38 ^a | 29 | 13 |
| Call my team if they are concerned or have a question | 228 | 114 | 50 ^a | 48 | 21 |

Cohen et al., 2013

Family Member Preferences

- Family member preferences (n=75)
 - 91% want to receive written information about veteran's mental illness
 - 79% want to attend a general or educational support group
 - 68% want to attend individual or group sessions
 - 91% want to call treatment team if concerned or have a question

Cohen et al., 2013

Recovery-Oriented Decision Support for Relatives (REORDER)

- Tested a shared decision-making (SDM) intervention to increase family involvement in mental health treatment
- Recruited Veterans with SMI without family involvement in care
- Up to three sessions with Veteran
- Up to three sessions with Veteran and family member



REORDER Outcomes

- 59% of Veterans who attended at least one REORDER session had at least one family REORDER session



Dixon et al., 2014



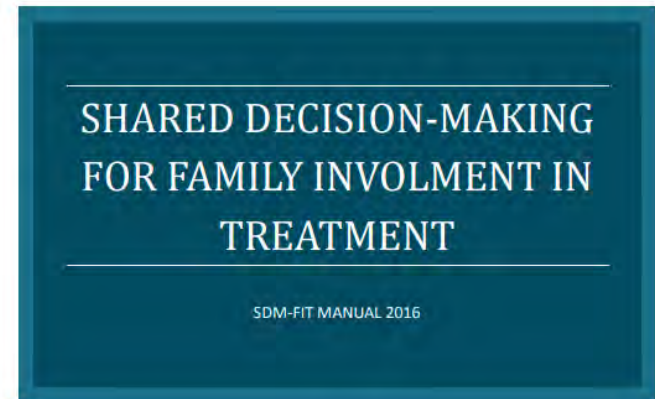
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Shared Decision-Making for Family Involvement in Treatment (SDM-FIT)

- Stand-alone protocol for use by any provider
- Provides structure for 20-30 minute discussion about family involvement in mental health treatment
- Download the manual on the [VISN 5 MIRECC website](#)



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HOW TO USE THIS MANUAL:

Sample of Veteran Guide

Non-italicized text provided for instruction.

Italicized text provides script for clinician to use.

The image shows a sample page from the 'Assessment of the Social Network' section of the SDM-FIT manual. The page is titled 'Assessment of the Social Network' and contains a list of instructions for the clinician. A callout box points to the instructions, stating 'Non-italicized text provided for instruction.' Another callout box points to the italicized text, stating 'Italicized text provides script for clinician to use.' The page also includes a section titled 'Where is your family?' with a list of family members and a section titled 'What is that important people in your life?' with a list of important people. A callout box points to the bottom of the page, stating 'Ample space for notes!'.

Assessment of the Social Network

- Read, or have the Veteran read, the text on the page about:
- Probe about important individuals in the person's social network – including all the relationships below.

Where is your family?

What is that important people in your life?

Ample space for notes!

SDM-FIT Legend:

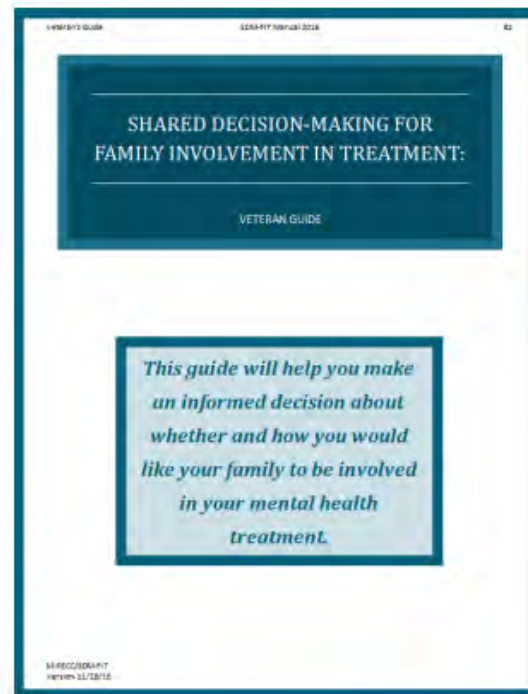


Clinician tip/ trouble shooting help



Examples

Introducing the Guide

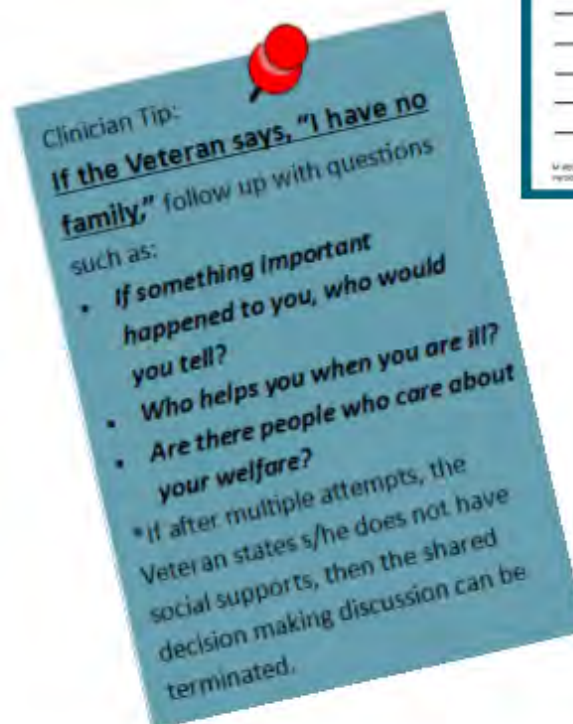


Introduce the guide as follows:

"This guide will help us have a discussion about whether you would like to have your family involved in your mental health treatment. Whether and how you choose to involve your family in treatment is completely up to you. This guide and discussion will help you make an informed decision, and will help us make a plan to put your decision into action."

Assessment of the Social Network

- Read, or have the Veteran read, the text on the page aloud.
- Probe about important individuals in the person's social network – including all the relationships listed.



SDM-FIT Manual - Version 2/28/17

Who is in your family?

Family can include all kinds of people, like:

- ☐ Mothers/fathers
- ☐ Siblings
- ☐ Spouses/significant others
- ☐ Children
- ☐ Aunts/uncles
- ☐ Cousins
- ☐ Grandparents
- ☐ Close friends
- ☐ Peers
- ☐ Other Veterans

What about for you?

Who are the important people in your life?

Version 2/28/17
Version 2/28/17

- Read, or have the Veteran read, the text on the page aloud.
- Probe about benefits of family involvement for the Veteran.

HEMSTOCK 2020

2020-2021

How might family involvement help you in achieving your recovery?

80

| Persons with family members involved in their mental health treatment have: | Family members who are involved with Veterans' mental health treatment have: |
|---|---|
| <ul style="list-style-type: none"> • Lower rates of hospitalization • Better attendance of mental health treatment • Better adherence to medication • Improved feelings of understanding and hope • Greater knowledge of mental illness and treatment services • Improved relationships • Greater employment rates | <ul style="list-style-type: none"> • Decreased stress • Improved well-being • Reduction in stress • Greater knowledge of mental illness and treatment services • More access to information concerning family support services • Greater sense of empowerment and self-efficacy • More ability to care for their own physical health |


Dr. Norman Furr said:

- It would help me feel better
- It would help me feel less alone
- It would help me feel better understood
- It would help me feel more supported
- It would help me feel more confident
- It would help me feel more in control

What about for you?

HEMSTOCK 2020

2020-2021

Clinician Tip:  If after multiple attempts, the Veteran cannot name any potential benefits of family involvement, then the shared decision-making discussion can be terminated.

Assessment of Concerns about Family Involvement

- Read, or have the Veteran read, the text on the page aloud.
- Probe about concerns regarding family involvement for the Veteran.

Family Involvement Concerns

What concerns do you have about getting family involved in your treatment?

What about for you?

Other Veterans have said:

- I would lose privacy.
- My family would hate me.
- My family would have less time for other important family responsibilities.
- I worry that my family may hostile me.

VERSION 2/28/17
VERSION 2/28/17

Clinician Tip #1:

If the Veteran has a lot of concerns, respond with:

"It sounds like you have a lot of concerns. It's completely up to you whether to have them involved. Before you decide, let's talk about the options for family involvement."

Clinician Tip #2:

If the Veteran cites privacy as a concern, respond with:

"Confidentiality is very important. We can't share any information with your family without your permission. We will definitely talk more about it later in this discussion. Before that, let's talk about the options for family involvement."

Assessment of Preferences for Family Involvement

- Read, or have the Veteran read, the text on the page aloud.
- Identify family member(s) that the Veteran would like to be involved.
- Identify preferred options for involvement.

SDM-FIT Manual 2/28/17

Family Involvement

Which family members do you want involved in your treatment?

How would you like them to be involved?

Different family members can be involved in different ways. Some options for family involvement:

- ☐ We could send your family member written materials about your mental illness.
- ☐ We could provide information for a general or education support group that your family member could attend.
- ☐ We could invite your family member to attend sessions that are part of your treatment, or to visit me on the unit.
- ☐ You could give your family member permission to call your treatment team if they have a question.

What about for you?

VIDEO/SCRIPT
VERSION 12/28/16

Clinician Tip:

If the Veteran has decided he/she would NOT like his/her family involved in treatment, AND

⇒ His/her main concern is confidentiality: skip to the next page and discuss this topic in detail before making a final decision.

⇒ His/her main concern is NOT confidentiality: the shared decision-making discussion can be terminated.

Discussion of Confidentiality

- Read, or have the Veteran read the text on the page aloud.
- For each family member that the Veteran would like to be involved, discuss what information can/cannot be shared with him/her.
- Answer any questions the veteran has about confidentiality.
- If within your professional purview/ scope, complete the relevant Release of Information forms.

[illegible]

Clinician Tip:

Clinician Tip:
If the Veteran's preferences for family involvement includes clinician contact with a family member, state the following:

"If we are in contact with your family members, they can give us any information about you that they want. If this happens, we will share that information with you, except in cases where there is an imminent safety concern."

VA Policy Guidance: Confidentiality

- Can't share info with family members without Veteran permission
- BUT – family members are allowed to share whatever they want with us!
- AND – there are exceptions to the need for written permission. From VHA Handbook 1163.04:

“VA Policy... permits sharing of pertinent information... with family members, even if permission from the Veteran is not obtained under two conditions: (1) The caregiver/family member is involved in the Veteran's personal care; and (2) The clinician deems it would be in the best interest of the Veteran to share the information with the caregiver.”



VA Policy Guidance

<https://vaww.portal.va.gov/sites/OMHS/familyservices/Lists/Policy/AllItems.aspx>

https://www.va.gov/vhapublications/ViewPublication.asp?pub_ID=2429

Action Plan

- Record a concrete ACTION PLAN with all the relevant information needed to carry out the plan.
- Action plan can include referrals to Family Intervention Team as appropriate – clinician can place consult in CPRS.

SDM-FIT Manual 2/28/17

What next steps should we take to make sure we get your family members involved in your mental health treatment according to your preferences?

Let's make a specific **ACTION PLAN!**

| What steps do you want to take? | What steps do you want me to take? |
|--|--|
| <input type="checkbox"/> Do you want to talk to your family member(s) about being involved? <input type="checkbox"/> Do you want to talk to your other treatment provider(s) about involving your family? | <input type="checkbox"/> Do you want me to reach out to your family member(s) about being involved? <input type="checkbox"/> Do you want me to pass along this information to your other treatment provider(s)? |
| | |
| | |
| | |
| | |
| | |
| | |

44-81001-SDM-FIT
Version 2/28/17

Examples include:

- ⇒ "Wife to attend session with psychiatrist. Wife- Jane Doe, 555-5555"
- ⇒ "Treatment team to mail educational materials to Veteran's brother. Brother- John Doe, 1234 Anywhere Street, Anytown, USA"
- ⇒ "Treatment team to provide NAMI brochures to Veteran to give to his mother and close friend"
- ⇒ "Veteran to provide contact information for social worker to his son"



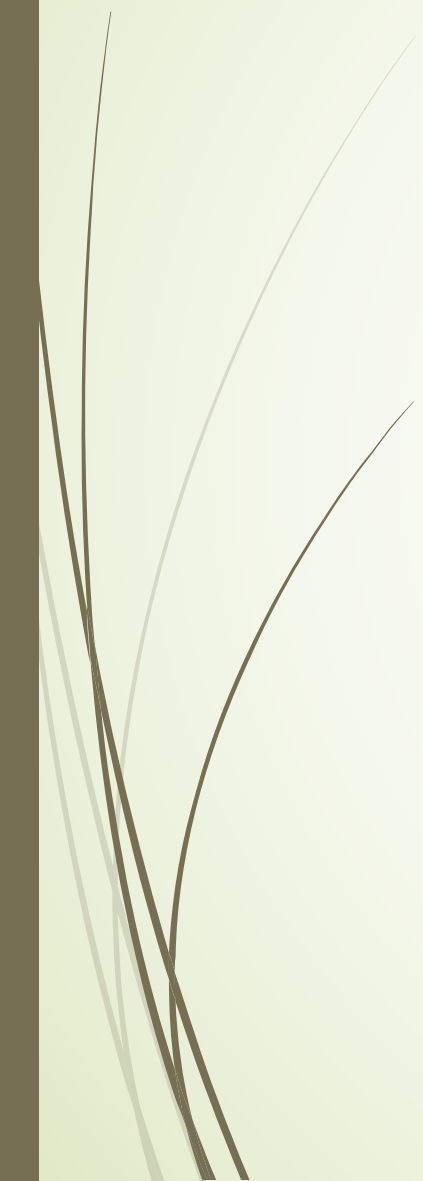
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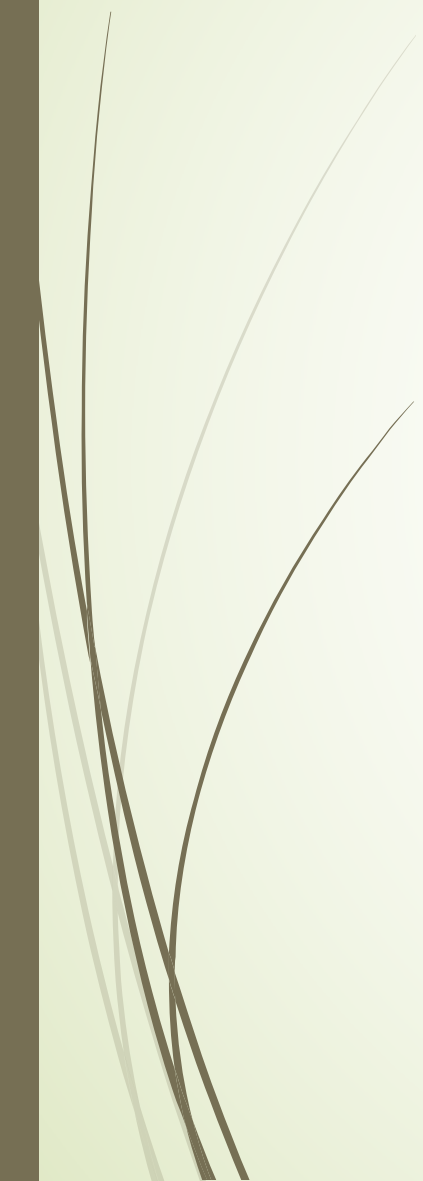


The Role of the Peer Specialist

- 
- To help people define what family is to them – not just blood relatives.
 - To educate people about how family can be supportive.
 - To educate people about the importance of having support and building a support system.



The Role of the Peer Specialist

- To educate about how different people can offer different kinds of support.
 - To encourage people to use their supports.
- 

The Family Matters Group


Manual for Peer Facilitators





What is the Family Matters Group?

- Interactive group
- Safe, non-judgmental space
- Discuss the potential role of family in the mental health recovery process
- Group members are provided brief fictional scenarios
- Group members discuss the pros and cons of various options for the person



Development of the Family Matters Group

- Shirley Maniece, C.P.S., created this group as a personal endeavor
- Ms. Maniece was influenced by the National Alliance of Mental Illness (NAMI) Family to Family Program
- Was also influenced by her participation in a clinical demonstration project with Dr. Anjana Muralidharan
- They worked together to implement a shared-decision making tool regarding family involvement



Family Matters Group Objectives

- Educate participants on opportunities for family support in the VA system
- Assisting in providing how each individual defines family
- Provide a space to discuss various topics related to family and mental health recovery
- Communication dynamics and the time and timing to connect with family
- When is a good time to share your mental health status with family members



Family Matters Group Agenda

- Set Group Guidelines (5 minutes)
- Definition of Family (5 minutes)
- Discussion of VA Resources for Family Members (5 minutes)
- General Discussion of Family and Recovery (10 minutes)
- Family Matters Interactive Game (25 minutes)



General Discussion of Family and Recovery (10 minutes)

- The group facilitator poses the following questions to the group, to generate discussion.
1. How has family impacted your recovery journey?
 2. When was the last time you shared a positive experience with family?
 3. What positive feelings have you experienced while on your recovery journey?
 4. What can you do alone while on your recovery journey?



Definition of Family (5 minutes)

- Many times an automatic response to the word family is only thought of as one's bloodline.
- Family can be bloodline or anyone not in the bloodline, who is deemed to be family.
- Family can be anyone who shares a meaningful close relationship with the individual.
- This may help group members to think through various sources of social support.



Family Matters Interactive Game (25 minutes)

- After the discussion of family and recovery, group members engage in an interactive game that introduces various mental health scenarios.
- The scenarios and corresponding solution options are typed on index cards.
- Group members volunteer to read aloud their scenario and the possible solution options.
- This is designed to encourage discussion, evoke change, and build supportive decisions



Scenario #1

- Marvin really wants to invite his brother to attend his therapy session appointment at the mental health clinic. However, Marvin is nervous and thinks that his brother will share things that his doctor doesn't know.

- What could Marvin do?
 - A. Don't invite his brother.
 - B. Tell his brother not to do any talking, just listen.
 - C. Be prepared for whatever his brother has to say.
 - D. Stop going to the mental health clinic.

Scenario #2

- Kate has been self-medicating and now she has been confronted by her partner. Kate is not ready to share the trauma she experienced while in the military. Kate's partner is a civilian and knows nothing about the military. Kate is leaving soon for the residential PTSD program.
- What could Kate do?
 - A. Avoid answering her partner but later on, write her story down in a letter and give it to her partner before leaving for the program.
 - B. Tell her partner, "You wouldn't understand."
 - C. Share only what she is emotionally ready to share.
 - D. Provide her partner with brochures and information on PTSD and family support groups.



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Potential Next Steps for You

- Visit the VA Family Services Sharepoint for more information
<https://vaww.portal.va.gov/sites/OMHS/familyservices/default.aspx>
- Check out what family supports your local NAMI chapter offers
- Ask your local EBP coordinator which clinicians are trained in evidence-based family treatments at your facility
- Create your own VA Family Resources for Mental Health Recovery brochure – we can help you tailor the brochure to reflect your local resources!
- Download and utilize the Shared Decision Making Protocol for Family Involvement in Treatment OR the Family Matters Group and let us know how it goes!
- Contact us with all your thoughts questions and concerns!

Contact information

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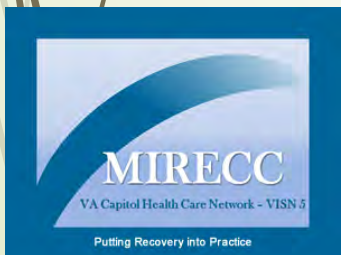
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